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Borough of Lytham Saint Anne's.

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# Annual Report FOR 1925.

BY

**JOHN P. LITT, M.D., D.P.H.,**

MEDICAL OFFICER OF HEALTH,

TOGETHER WITH THE

**Annual Reports of**

**J. R. RIGBY, M.R.C.V.S.,**

VETERINARY INSPECTOR,

AND

**HAROLD YATES, C.R.S.I., M.I.C.S.**

CHIEF SANITARY INSPECTOR.

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ST. ANNES-ON-SEA :  
Fylde Press, Ltd., St. Andrew's Road North.



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# Borough of Lytham Saint Anne's.

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## HEALTH COMMITTEE:

Alderman ENGLAND, Chairman.

The Mayor (Alderman Edward R. Lightwood, B.A., J.P.).

Alderman C. F. Critchley, J.P., C.C.	Councillor Heyes.
Alderman Holden, J.P.	Councillor Ingham.
Alderman Hope.	Councillor Jesson.
Alderman Myerscough.	Councillor Price.
Councillor Barnes.	Councillor Rossall, M.B.E., J.P.
Councillor Beaver.	Councillor Rawstron.
Councillor Brown.	Councillor Smethurst, J.P.
Councillor Chadwick, J.P.	Councillor Smith.
Councillor Eastwood.	Councillor Turner.
Councillor Forshaw.	Councillor Wood, J.P.
Councillor Harwood.	Councillor Whittaker.

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## MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

Alderman ENGLAND, Chairman.

The Mayor (Alderman Edward R. Lightwood, B.A., J.P.).

Alderman Myerscough.	Councillor Harwood.
Councillor Barnes.	Councillor Ingham.
Councillor Eastwood.	Councillor Rossall, J.P.
Mrs. Walton, President St. Anne's Centre.	
Mrs. Penree, President Lytham Centre.	
Mrs. Fowler, St. David's Road South, St. Anne's.	
Mr. F. H. Hill.	

Annual Report  
OF THE  
Medical Officer of Health.  
FOR THE YEAR 1925.

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HEALTH DEPARTMENT,  
PUBLIC OFFICES,  
ST. ANNES-ON-SEA,

(To the Chairman and Members of the Health Committee).  
Miss ROSSALL AND GENTLEMEN,

I have the honour to submit my Annual Report for the year ending December 31st, 1925.

The Report this year is in the nature of a "Survey Report," in accordance with the instructions issued by the Ministry of Health, and embraces a period of five years. An effort has been made to review as fully as possible the various developments which have taken place since 1921, and, wherever possible, comparative figures have been included.

I desire again to thank the Health Committee for the help they have so readily accorded to me, and to express my appreciation of the work which has been so ably performed by the Staff of the Health Department during the year.

The Veterinary and Chief Sanitary Inspectors have prepared separate Reports, which are appended.

I have the honour to be,  
Your obedient Servant,  
JOHN P. LITT, M.D.

## NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (exclusive of Foreshore), 5,806 acres.

Area of Foreshore, 5,891 acres.

Population, Census 1921, 25,887. Estimated 1925, 21,780.

### Physical Features and Character of the Area.

The Borough is a seaside resort, situated on the Fylde Coast, and extends from the Estuary of the River Ribble to the Southern boundary of Blackpool, a distance of six and three-quarter miles. The curving coast line faces successively South, South-West, and West. The district is very flat and the climate equitable. The soil is of a sandy nature near the sea, but inland is chiefly clay.

Number of inhabited houses (1921), 4,439.

Number of families or separate occupiers (1921), 4,744.

Rateable Value, and sum represented by a penny rate:

Year.	Rateable Value.	Sum represented by a penny rate.
1921 .....	£221,042 .....	£835 0 0
1922 .....	£222,798 .....	£920 0 0
1923 .....	£232,623 .....	£950 0 0
1924 .....	£247,820 .....	£975 0 0
1925 .....	£259,778 .....	£1,066 0 0

The above figures show very graphically the growth of the Borough.

### Social Conditions, including the Chief Occupations of the Inhabitants.

The population is more residential than industrial. There is a slipper works at Saint Anne's, employing 300 hands (many of whom do not reside in the Borough), an aircraft works, a shipbuilding and engineering works, and several laundries. None of these have any special influence on public health.

## Vital Statistics.

	Males.	Females.	Total
Births—Legitimate .....	128	110	238
Births—Illegitimate .....	6	8	14
Birth-rate (R.G.) .....	11.5 per 1,000		
Deaths .....	126	171	297
Death-rate (R.G.) .....	13.6 per 1,000		
Number of women dying in, or in consequence of child-birth :			
From Sepsis .....			Nil.
From other causes .....			3
Infant Mortality :			
Total .....			17
Legitimate .....			13
Illegitimate .....			4
Deaths from Measles (all ages).....			1
Deaths from Whooping Cough .....			Nil.
Deaths from Diarrhoea (under two years).....			1

The causes of death, in detail, during 1925 will be found in Table II at the end of the Report.

## Rates per 1,000 of the Population :

Mean of 5 years.	Birth Rate.	Death Rate.	Death Rate from Tuberculosis of Respiratory System.	Rate of Deaths under 1 year to 1,000 Births
1895-1899 .....	19.4 .....	13.3 .....	1.24 .....	143
1900-1904 .....	18.0 .....	12.4 .....	1.01 .....	114
1905-1909 .....	14.5 .....	11.3 .....	0.75 .....	82
1910-1914 .....	12.8 .....	10.8 .....	0.43 .....	81
1915-1919 .....	10.9 .....	13.6 .....	0.61 .....	55
1920-1924 .....	12.7 .....	13.0 .....	0.49 .....	52
Year 1924 .....	11.6 .....	13.9 .....	0.41 .....	63
Year 1925 .....	11.5 .....	13.6 .....	0.27 .....	67

Increase or Decrease in 1925 on mean of five years :

1920-1924 .....	-1.2 .....	+0.6 .....	-0.22 .....	+15
Previous year..	-0.1 .....	-0.3 .....	-0.14 .....	+ 4

The above comparative figures demonstrate the great fall in the Birth-rate, the almost stationary Death-rate, and

the extremely satisfactory decrease in the number of deaths from Pulmonary Tuberculosis and in children under one year of age.

### **Poor Law Relief.**

The amount of Poor Law Relief granted in 1925 was £784 15s. 6d. Hospital and gratuitous medical relief is only used to a small extent.

There have been no specially noteworthy causes of sickness or invalidity during the period under review, nor are there any conditions of occupation or environment which appear to have had a prejudicial effect upon the health of the inhabitants.

### **GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.**

Hospitals provided or subsidised by the Local Authority :

- (1) Tuberculosis : None ; cases are dealt with by the County Authority.
- (2) Maternity : None.
- (3) Children : None.
- (4) Fever : Fylde Joint Hospital for Infectious Diseases, situated at Moss Side, outside the Borough boundary.  
(48 beds and 12 cots.)
- (5) Smallpox Hospital at Elswick. (15 beds.)

The Fever and Smallpox Hospitals are partially supported by the Authority.

There is no institutional provision for unmarried mothers, illegitimate infants, or homeless children in the area.

### **Ambulance Facilities.**

- (a) For Infectious Cases : The Fever Hospital provides transport for cases of Infectious Disease.

(b) For Non-Infectious and Accident Cases : An excellent and up-to-date Motor Ambulance, centrally situated at Ansdell, was provided in June, 1924. It has been in use on 180 occasions during the year, and a trained ambulance man is always in attendance. The old horse ambulance is retained for emergency work.

### Clinics and Treatment Centres.

Name	Situation	Nature of Accommodation	By whom provided
Maternity and Child Welfare	(1) Lytham : Old Council Offices (2) St. Annes : Public Offices	Waiting-room, weighing-room, Consultation-room Waiting-room, weighing-room, Consultation-room	Local Authority Local Authority
School Clinics	(1) Lytham : Old Council Offices (2) St. Annes : Public Offices	Waiting-room, Minor Ailment room, Consultation room Waiting-room Minor-Ailment Dressing-room ; Consultation and Ophthalmic room ; Dental Surgery and Recovery-room , Nurses' room	Local Authority Local Authority
Tuberculosis Dispensaries	None		Work undertaken by County Authority
Day Nurseries	None		
Treatment Centres for Venereal Disease	Victoria Hospital Blackpool	Waiting-rooms, Consultation-rooms, &c.	Lancashire County Council

### PUBLIC HEALTH OFFICERS TO THE LOCAL AUTHORITY.

MEDICAL OFFICER OF HEALTH : John P. Litt, M.D., Ch.B., D.P.H., D.T.M. & H. Whole time. Also holds appointment of School Medical Officer.

CHIEF SANITARY INSPECTOR : H. Yates, C.R.S.I., M.L.C.S Whole time.

SANITARY INSPECTOR : F. Haworth, C.R.S.I., M.S.I.A. Whole time.

**VETERINARY INSPECTOR:** J. R. Rigby, M.R.C.V.S. Part time.

**HEALTH VISITORS:** Miss N. B. Berry, C.M.B. (Certified Nurse), and Mrs. E. Wooller, C.M.B. (Certified Nurse). Whole time. Both ladies also act as School Nurses. Salary contribution is made under the Public Health Acts, or by Exchequer grants in all cases, with the exception of the Veterinary Inspector.

### **Professional Nursing in the Home.**

(a) General : There are two Sick Aid Societies for the Poor in the Borough, three Nurses being employed. No contribution is made by the Council to these Societies. Nurses are also supplied by the local Nursing Homes.

(b) For Infectious Disease : No special provision, but arrangements would be made should the necessity arise.

### **Midwives.**

No midwives are employed or assisted by the Local Authority, but there are nine midwives registered with the County Council, who practice in the district. The number of registered midwives has increased as follows : 1921, 5 ; 1922, 5 ; 1923, 7 ; 1924, 8 ; 1925, 9.

### **Chemical Work.**

No chemical analyses are undertaken in the area ; all samples, specimens, &c., being forwarded to the County Analyst for examination.

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## **LEGISLATION IN FORCE.**

### **List of Adoptive Acts of Parliament.**

Baths and Wash-houses Acts, 1846 to 1899.

Infectious Diseases (Prevention) Act, 1890.

Public Health Acts Amendment Act, 1890 (Parts II, III, IV and V).

Museums and Gymnasiums Act, 1891.

Private Street Works Act, 1892.

Public Libraries Act, 1892 to 1919.

Public Health Acts Amendments Acts, 1907, with certain exceptions and amendments which are fully set out in Section 8 of the Lytham Saint Anne's Corporation Act, 1923.

Health Resorts and Watering Places Act, 1921.

### Local Acts of Parliament.

Lytham Saint Anne's Corporation Act, 1923 (Royal assent 31st July, 1923).

### Bye-Laws and Regulations.

#### Date.

June 15th, 1880—Pleasure Boats and Vessels (Lytham).

April 29th, 1889—The Beach (Lytham).

Oct. 2nd, 1891—Pleasure Boats and Vessels (St. Anne's).

Oct. 24th, 1903—Seashore and Esplanade (St. Anne's).

May 29th, 1907—The Beach (Lytham).

June 15th, 1907—Seashore (Lytham).

Nov. 14th, 1916—Ashton Gardens and Church Road Recreation Ground (St. Anne's).

July 27th, 1921—Green Drive Golf Course (Lytham).

Feb. 5th, 1923—Dairies, Cowsheds and Milkshops.

Mar. 26th, 1923—Cleansing of Footways and Pavements, Removal of House Refuse, &c.

Mar. 26th, 1923—Public Slaughter-houses.

Mar. 26th, 1923—Public Bathing.

Mar. 26th, 1923—Cemeteries.

Mar. 26, 1923—Horses, Ponies, Mules and Asses.

Mar. 26th, 1923—Mortuaries.

April 4th, 1923—Nuisances.

April 23rd, 1923—Market.

May 16th, 1923—Hackney Carriages.

Nov. 22nd, 1923—New Streets and Buildings.

June 13th, 1924—Routes for Motor Omnibuses.

May 18th, 1925—Offensive Trades.

Aug. 18th, 1925—Routes for Motor Omnibuses,

Nov. 14th, 1925—Hackney Carriages,

## SANITARY CIRCUMSTANCES OF THE AREA.

### Water.

The water supply to the District is plentiful, and of excellent quality. It is controlled by the Fylde Water Board, and is obtained from reservoirs impounding the water of the River Calder and Grizedale Brook. The water is regularly examined, both chemically and bacteriologically. The hardness is 3°. The approximate number of dwelling-houses supplied direct, including hotels, farms, flats, &c., is 6,482; no houses are supplied from stand pipes. There have been no new works during 1925.

### Rivers and Streams.

There is no pollution of rivers or streams in the area.

### Drainage and Sewerage.

The method employed is principally that of gravitation to the sea, the sewage being untreated. The sewage from a portion of the Lytham District is pumped from the sewer into settling tanks at the Refuse Disposal works, and is discharged into the sea one hour after high tide.

The sewers are now unable to cope with the needs of the ever-growing Borough, and a scheme has been prepared for re-sewering a large portion of the area at an estimated cost of £250,000.

In the outlying parts of the District where no sewers exist the drainage is into cesspools.

All new drains are tested by smoke or water, and old drains are smoke-tested where there is reason to believe that any defect exists.

The sewers are periodically flushed.

### Closet Accommodation.

There are 17 privy closets, 61 pail closets, and 50 dry ash pits in the rural parts of the Borough. The fresh water closets number 9,496, waste water closets 35, and there are 6,081 moveable ashbins.

There is no definite policy at present for abolishing pail closets, &c., as they only exist in country districts where no sewer is available. Two pail closets were converted during the year to fresh water closets. In all new property fresh water closets are insisted upon.

The number of houses at which moveable ashbins have been substituted for fixed receptacles was four in 1925, and seven during the five years 1921-25.

### **Scavenging, House Refuse Removal, etc.**

See appended report of the Chief Sanitary Inspector.

### **Sanitary Inspection of the Area.**

Three hundred and ninety-four nuisances have been located as under, and 366 of them have been remedied, the remaining 28 being in course of abatement.

	Number
Blocked drains .....	72
Blocked gullies .....	12
Blocked water closets .....	14
Dampness in ceilings .....	2
Dampness in walls .....	7

#### **Defective :**

Bath and Lavatory waste pipes.....	4
Ceilings .....	9
Chimneys .....	6
Downspouts .....	4
Doors .....	1
Drains .....	8
Dustbins .....	117
Eaves Gutters .....	12
Fire Ranges .....	1
Floors .....	3
Gullies .....	1
Roofs .....	22
Sanitary Fittings .....	20
Soil Pipes .....	4
Walls .....	7

Wash Boilers .....	2
Waste Water Pipes .....	5
Water Closets .....	9
Window Frames, Sills, &c. ....	6
Yard Surfaces .....	17

#### Insanitary :

Ashpits .....	4
Manure Receptacles.....	3
Water Closets .....	4
Yards .....	3
Accumulations of Manure, &c. ....	7
Overcrowding .....	1
Dirty Rooms .....	7

### Summary of Visits and Inspections.

	Number
Visits to Nuisances (including re-inspections)....	1714
Visits to Abattoirs .....	679
Visits to Cowsheds .....	128
Visits to Dairies .....	82
Visits to Workshops and Bakehouses .....	408
Visits to Infectious Diseases .....	82
Visits to Manure Receptacles .....	186
Visits to Offensive Trade Establishments .....	193
Smoke Observations .....	22

### Number of Notices Served.

Informal, 287; Statutory, 1. Legal proceedings were instituted in one case, the result being an order for abatement and the payment of costs; in all other instances the Informal Notice achieved the desired result.

### Smoke Abatement.

The time limit for the emission of black smoke is  $2\frac{1}{2}$  minutes in any given half hour. During 1925 twenty-two observations were made. The limit imposed by the Corporation was exceeded in five cases. No legal proceedings were necessary, but the firms were communicated with, and advice was given regarding the prevention of the nuisance.

## Premises and Occupations which can be controlled by Bye-laws and Regulations.

There are thirteen offensive trades in the District, comprising—Gut-scraping 1, marine stores 1, bone grinding 1, fish and chip shops 10.

No action has been necessary during the past twelve months.

There are no common lodging houses or houses let in lodgings.

## Factories and Workshops.

There are 45 factories and 170 workshops on the Register, and these are inspected at frequent intervals, 408 inspections having been made.

The workshops on the Register number, and include :—

Baking and Confectionery .....	40
Blacksmiths .....	5
Boot Repairing .....	18
Cabinet Making and Upholstering .....	12
Cycle Repairing .....	4
Dressmaking .....	19
French Polishing .....	5
Golf Bag Making .....	1
Harness and Saddle Making .....	4
Joinery .....	14
Laundries .....	1
Leather Belts .....	1
Leather Buckles and Laces .....	1
Millinery .....	20
Sheet Metal Worker.....	1
Stained Glass Works .....	1
Stone Masons .....	1
Tailoring .....	14
Tin Plate Working .....	4
Wheelwrights .....	4

The factories number 45, and comprise the following :

Aerated Water and Bottling Depots.....	3
Blacksmith .....	1
Boot Repairing .....	1
Electricity Works .....	1
Fertiliser Plant .....	1
Gas Works .....	1
Joinery .....	10
Laundries .....	5
Letterpress Printing .....	5
Milk Bottling Depots .....	1
Motor Repairing Works .....	9
Refuse Destructor Works .....	2
Shipbuilding Yard .....	1
Shoeing Forge .....	1
Shoe Making .....	1
Stone Dressing .....	1
Tram Car Repair Works .....	1

## OTHER SANITARY CONDITIONS REQUIRING NOTICE.

### Ribble Mussel Beds.

During the period under review the Ribble Mussel beds were closed on account of the contamination of the fish by sewage, and it is of interest to summarise the events which led up to their closure.

In November, 1915, Dr. Fisher, Medical Officer of Health to the Lytham Urban District Council, sent specimen mussels for examination; evidence of sewage pollution was found in each sample, and an inquiry took place at Preston in February, 1916. In March, 1919, the Sheffield Market was closed to Lytham mussels, and in December of the same year a case of typhoid fever at Batley, Yorkshire, was stated to have been traced to mussels obtained from the Ribble beds.

Further specimens were submitted for examination early in 1920, and all were found to contain *Bacillus Coli*, an intestinal organism indicating contamination by sewage.

This fact was corroborated by a report from the Medical Officer of Health of Dewsbury, who had also had specimens examined.

Attention was called to the pollution of the beds in reports issued by the Superintendent of the Lancashire and Western Sea Fisheries in 1921-22, and in 1923 the Ministry of Health conducted an inquiry, the outcome being a report of which the following is a precis of the most important points :—

All the mussel beds in the Ribble Estuary were liable to sewage pollution, and the Minister had come to the conclusion that the sale of these mussels without effective cleansing was a source of danger to the public health. He had decided to make regulations prohibiting the sale for human consumption of mussels taken from the Estuary, unless they were effectively cleansed.

He also was advised that no place could be found in the Estuary where the water was sufficiently clean to admit of cleansing the shellfish by means of the ordinary methods of re-laying. The beds were accordingly closed by the Minister's order on October 22nd, 1923.

A suggestion came to hand in September, 1925, that Lytham mussels might be taken to North Wales for cleansing at the Fisheries Experiment Station, Castle Bank, Conway, and extensive inquiries were made to see if the scheme were practicable. Dr. Jenkins, the Superintendent of the Lancashire Sea Fisheries, was interviewed, correspondence took place with Dr. Dodgson, the Scientist in charge of the Conway Station, and the Railway Company were approached as regards charges for the transport of the mussels.

The matter was brought before the Health Sub-Committee, on December 18th, 1925, and after discussing the details of the scheme at length, the Committee came to the conclusion that they were unable to recommend the Council to entertain the suggestion of sending the mussels to Conway.

The principal reasons for this decision were as follows :

- (1) No assurance could be obtained from Conway that the station could accept our mussels with any regularity ;
- (2) Dr. Dodgson stated that he could not accept responsibility for the purification of Lytham mussels, unless the loading and unloading were carried out under the supervision of a responsible Inspector as there is great danger of injury to the mussels, if roughly handled in transit ;
- (3) The expenses entailed would render the scheme financially unsound, leaving little or no profit to the fishermen.

An alternative suggestion that the Corporation should erect purification tanks at Lytham at a cost of from four to five thousand pounds was also vetoed.

At one time it was thought that the new Borough Sewerage Scheme would obviate the fouling of the mussel beds and lead to their re-opening, but the Superintendent of the Lancashire Sea Fisheries assures me that no advantage will result.

The matter is, therefore, in abeyance, and it seems unlikely that the beds will be re-opened for some time to come.

### **Disposal of Refuse on Open Spaces.**

This matter was referred to in my Report for 1924, and it has been considered on several occasions by the Health Committee during 1925. An arrangement has been completed with the Agent to the Lytham Estate to erect notice boards—forbidding the deposit of refuse, and threatening offenders with prosecution—on plots of land belonging to Mr. Clifton.

It is intended to communicate with all land lessees, asking them to erect similar notices on open spaces in their possession. The plots in question are used as “ tips ” for the deposit of garden and other refuse by all and sundry, and being outside the jurisdiction of the Corporation, as their

condition does not menace health, we are dependent upon the co-operation of the owners if any improvement is to be obtained.

The nuisance will, of course, automatically abate as these areas become built upon, but in the meantime the question is an acute problem, for their untidy and unsightly condition leads to much adverse comment from residents and visitors alike.

### Borough Cemetery.

It has been evident for some little time that the Cemetery accommodation in the Borough was rapidly becoming exhausted, and a decision was arrived at to provide a Burial Ground, which would supply the needs of the District for many years to come. A site had been acquired on Clifton Drive North by the Saint Anne's Urban District Council, and an option was held by the Lytham Urban District Council on a site at Saltcotes. On the amalgamation of Lytham with Saint Anne's it was, however, considered advisable to look for a more central site which would serve both ends of the Borough. Such a site was found in Lytham Hall Park, and the sanction of the Minister of Health was asked in order that it might be acquired for this purpose. The area suggested comprised 34 acres, the position being excellent, surrounded on two sides by a belt of trees, the ground was sufficiently elevated above the drainage level of the locality and well beyond the limits of present or future dense building activities. The trial holes, however, demonstrated the fact that the subsoil on a large portion of the site was mainly clay, which is by no means ideal for burial purposes. This difficulty could, however, have been overcome by efficient deep drainage, the effluent discharging into the Liggard Brook after suitable treatment.

A public inquiry was held on July 22nd, 1924, by two Inspectors appointed by the Ministry of Health—H. R. Hooper, M.Inst., C.E., and S. W. Wheaton, M.D., F.R.C.P.—and the evidence considered.

The Minister's report raised various objections to the site, and suggested that further trial holes be prepared on the adjoining ground to the south; this was done, and the subsoil was found to be more satisfactory. A new plan was, therefore, prepared, which included this southerly area and dispensed with that part of the site consisting mainly of clay. The total area was now reduced to 26 acres, and was eminently suitable, but deep drainage and treatment of the effluent were still considered essential. The Ministry sanctioned the construction of an approach roadway to the new site, and this work was carried out during 1925. Fencing has also been erected, the ground has been levelled, ploughed and sown with grass seed, and the filter tanks commenced.

The plans prepared by Messrs. Mawson & Sons, Landscape Artists, provide for a very beautiful lay-out, and it is hoped that the site will be available for interments during 1926.

### Fairhaven Lake Baths.

A report on the suitability of these open-air baths was submitted in October, 1924. It was pointed out that the proximity of the sewage outfall to the Bath intake pipe constituted a danger, and it was considered inadvisable to use the Baths under existing conditions.

The Minister of Health, on being approached with regard to the development of the Ashton Marine Park, expressed the same opinion, and it was decided to discontinue the use of these Baths until the sewage outfall was extended through the training wall to the main river channel, a step which is contemplated at an early stage in the new Sewage Scheme for the Borough.

The Baths remained closed during 1925, and there is little possibility of their re-opening in 1926.

### Vans.

There are in the Borough fifteen vans used as dwellings, and these have been kept under close supervision.

Closet accommodation has been provided in each case, and arrangements made with regard to the water supply.

### Camps.

During the summer months a number of Boys' Brigades, Cadet Corps, Scouts, &c., camp in the open fields of the Borough. They are inspected at intervals to ensure that adequate arrangements have been made for water supply and sanitary accommodation, and that they are kept in a cleanly condition. There was no reason for complaint during the last twelve months.

### Laboratory Work.

This is carried out by arrangement with the Public Health Laboratory, York Place, Manchester, and the following specimens were sent for examination during the year :—

Blood 5, Sputum 28, Throat Swabs 29, and Milk 3.

The milk samples were from cows suspected of tuberculosis of the udder by the Veterinary Inspector, and in two cases tubercle bacilli were discovered.

### Schools.

The Elementary Schools were inspected during the year, and a report in detail was forwarded to the Secretary for Education. It was pointed out that in several instances the general cleanliness left much to be desired, and certain recommendations were put forward for consideration. The Education Committee gave the matter prompt attention, and a special sub-committee was formed to report upon the defects. There is reason to believe that in consequence an improvement may be expected early in 1926.

The water supply in all cases is adequate and of good quality.

No schools or classes were closed during the year on account of Infectious Disease. The policy of exclusion of individual children, as advised in the Memorandum on Closure of and Exclusion from School, 1925, was adopted, each case being visited by a School Nurse, who gave advice as to the care of the patient.

There is little doubt that this method of dealing with epidemic disease is far more satisfactory than the older procedure of indiscriminate closure in a district such as this, where the scholars are in contact with one another whether the schools are open or closed.

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## HOUSING.

### (1) General Housing Conditions.

The greater part of the property in the District is of a good-class residential type, and the shortage of smaller houses has to a great extent been overcome by the Council's Housing Scheme. There are a number of large houses empty at the moment, but this is chiefly due to the fact that they are "for sale" only, and houses of moderate size and modern in character can be built for less than the prices demanded for the existing property.

The Council has built to date 226 rental houses and 100 subsidy houses, and at the end of the year 53 were in course of erection. When these are completed the position will be reviewed as to the necessity for a further building scheme.

The number of habitation certificates granted by the Council in the period under review is of interest, and shews dramatically the rapid increase in the size of the Borough :

1921 .....	129
1922 .....	160
1923 .....	171
1924 .....	393
1925 .....	619

There have been no noteworthy changes in the population during the period under review, nor are any anticipated in the near future.

### (2) Overcrowding.

The extent of overcrowding is very slight, being confined to isolated cases amongst the small working-class population. The causes are chiefly high rents and the high

prices demanded for houses on sale. The Council is, as previously noted, attempting to overcome any shortage by the erection of an adequate number of rental and subsidy houses under the Borough Housing Scheme.

During the year one tenant was proceeded against under section 91 of the Public Health Act, 1875, and an order of abatement was made by the Justices.

### (3) Fitness of Houses.

The general standard of housing in the area is very good, the defects found to exist in unfit houses being principally dampness in the walls and defective roofs in the older type of property.

Rental property is, on the whole, exceedingly well looked after both by owners and tenants, and no acts of waste or neglect have come to light.

The general action taken as regards unfit houses under the Public Health Acts was chiefly in respect of minor defects, and these were promptly remedied on notifying the owners. It was unnecessary to proceed under the Housing Acts. No special measures were taken to secure improved management of property by owners or care of property by tenants, as the existing conditions were deemed satisfactory, and there are no "back-to-back" houses in the area.

The conditions of water supply and refuse disposal are very good and the closet accommodation is adequate.

There are no unhealthy areas, and no bye-laws relating to houses let in lodgings, tents, vans, sheds, &c., as these are not considered necessary at present.

During the year a shed—previously used as a stable—occupied by a man, wife, and one child, was closed, and again converted to its former use. The tenant moved to a good caravan, with adequate arrangements for water supply, &c.

## HOUSING STATISTICS FOR THE YEAR 1925.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b)) .....	619
(b) With State assistance under the Housing Acts :	
(1) By the Local Authority .....	212
(2) By other bodies or persons.....	105

Number of houses in course of erection under Council's building scheme ..... 53

Financial assistance for purposes of increasing housing accommodation :

Have any advances been made during 1925 :

- (a) By loans? Yes. No., 199. Amount of loans £101,407.
- (b) By subsidy? Yes. No., 205. Amount of subsidies, £20,500.

Unfit Dwelling-houses :—

Inspection :

- (1) Total No. of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ..... 152
- (2) No. of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 ..... 54
- (3) No. of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation..... Nil
- (4) No. of dwelling-houses (exclusive of those referred to under (3) ) found not to be in all respects reasonably fit for human habitation ..... 1

Remedy of Defects without Service of formal Notices :—

No. of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers (in course of abatement).....	1
--	---

Action under Statutory Powers :—

A.—Proceedings under Section 3 of the Housing Act, 1925 .....	Nil
B.—Proceedings under Public Health Acts .....	Nil
C.—Proceedings under Section 11, 14 and 15 of the Housing Act, 1925 .....	Nil
D.—No. of houses demolished voluntarily by owners, or converted to workshops, &c.....	Nil

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## INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.

There are 32 farms in the Borough, and 30 Dairymen and Purveyors of Milk (other than cowkeepers) are on the Register.

The milk supply produced within and brought into the District is generally wholesome. Facilities exist for the purchase of certified and grade A milk, but sales are limited on account of the excessive cost of the former, and the small quantity of the latter available. One retail firm supplies certified milk from Keswick, another from Manchester, and a third, registered with the County Authority, brings grade A milk into the District daily from Great Eccleston. Unfortunately the supply of grade A milk is not great, and the vendor is quite unable at present to supply all applicants. It is to be hoped that in the near future the business may be extended, or other farmers come into the scheme for supplying bottled graded milk at a reasonable price, as there seems no doubt that the demand for pure unpolluted milk is growing rapidly.

The dangers to health from a contaminated milk supply are insufficiently appreciated by the general public; diseases

such as typhoid and scarlet fever can be transmitted by milk, and tuberculosis in children, especially of the glands, bones and joints, is very frequently due to the drinking of milk from tubercular cattle.

The arrangements for supply and distribution are adequate as regards quantity, but the present general system of distribution by means of carts, bicycles, &c., by which it becomes necessary to pour milk from the large to the small cans in the street is far from ideal and must lead to some degree of contamination.

### Milk (Special Designations) Order, 1923.

The number of dealers' licences granted for the sale of milk under special designations is as follows :—

" Certified " Milk .....	3
" Grade A " (Tuberculin tested) Milk.....	Nil
*Grade A Milk .....	Nil
Pasteurised Milk .....	Nil

\*The retailer mentioned above is licensed by the County as he has no distributing premises within the Borough.

There have been no cases of refusal to grant or revocation of licences for graded milk during the past twelve months.

The Dairies, Cowsheds and Milkshops are periodically inspected, and on the whole their condition is satisfactory. Where cows are habitually grazed the amount of air space in cubic feet required for each cow is not specified in the Bye-laws, but where cows are not habitually grazed 800 cubic feet per cow is insisted upon.

The total number of cowkeepers is 32, all being on the register, and 128 inspections were carried out during the year. There are in addition 30 registered dairymen or milk purveyors.

Milch cows are inspected quarterly by the Veterinary Inspector, and his report is appended.

Samples of milk are taken by him from any suspected animal and sent for bacteriological examination, the cow in question being segregated pending the result of the inquiry. Three samples were sent in 1925, of which two were positive and one negative.

Tuberculous cattle are reported to the County Authority under the Tuberculosis Order, 1925, and are dealt with by the County Veterinary Inspector, a member of the Health Department being present at all post-mortems. Five animals were slaughtered under the Order in 1925.

### (b) Meat.

All animals are inspected at the time of slaughter by a qualified Sanitary Inspector. All condemned meat is disposed of at the Destructors.

There are two public slaughter-houses in the area, one at Lytham and the other at Saint Anne's, and both are conducted satisfactorily. Six hundred and seventy-nine visits have been paid during the year. There are no private slaughter-houses.

The total number of animals slaughtered in 1925 was 18,097, comprising :—

Beasts .....	1516
Calves .....	501
Sheep and Lambs .....	15489
Pigs .....	587
Suckling Pigs.....	4

### Amount of Food Condemned or Surrendered during 1925 as Unfit for Human Consumption.

#### Tuberculous Carcasses and Parts :—

Three Cows .....	1382 lbs.
Six Forequarters Beef .....	830 lbs.
Fifteen Beasts' Offal .....	1718 lbs.
One Pig .....	180 lbs.
Fifteen Pigs' Heads.....	265 lbs.
Sixteen Pigs' Offal .....	762 lbs.

Diseased unsound and unwholesome meat (other than above) :—

Beasts' kidneys frozen (unsound) .....	38 lbs.
Chilled beef (unsound) .....	80 lbs.
Twenty beasts' livers (cirrhosis) .....	278 lbs.
One calf (unsound) .....	80 lbs.

Other foodstuffs :—

Five rabbits unsound. Unsound salmon .....	10 lbs.
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### **Administration of the Public Health (Meat) Regulations, 1924.**

All butchers have been circularised with regard to these Regulations, and efforts have been made to see that they are carried out.

It has been necessary to warn one butcher for contravention of the section dealing with the covering of meat in transit, and since then there has been no further cause for complaint.

No arrangements have been made for marking of carcasses.

#### **(c) Other Foods.**

All places where food is prepared are regularly inspected. There are 40 bakehouses, and on inspection their general condition was found to be satisfactory. A total of 124 visits was made during the year.

Lime-washing was due in 22 cases, and in two instances slight sanitary defects were found. These matters have now been remedied.

Periodical inspections of Restaurant Kitchens, Ice Creameries, &c., have also taken place.

#### **(d) Food Poisoning.**

No cases of food poisoning have been reported during the year, and it was not found necessary to institute any legal proceedings.

### (e) Sale of Food and Drugs Act.

Eighty-six samples of milk (including two informal samples) were taken by the Chief Sanitary Inspector during 1925. They were obtained from the vendors in the course of delivery, and were forwarded for examination by the County Analyst.

Ten were found to be slightly deficient in fat, and one contained a very small amount of cow dung.

Warning notices were issued in each case.

Samples of other foods are taken by the County Authority and the following return has been furnished by Superintendent Crapper of the Lancashire County Constabulary :—

Arrowroot .....	1	Milk .....	16
Rice .....	2	Ground Ginger .....	2
Pepper .....	4	Cocoa .....	2
Coffee .....	4	Lard .....	1
Lemon Cheese .....	3	Baking Powder .....	1
Sago .....	1	Margarine .....	4
Epsom Salts .....	1	Tomato Soup .....	1

All were found to be genuine.

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### PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The following table shews the position as regards infections conditions during the period under review :—

## INFECTIOUS DISEASES.

DISEASE.	1921			1922			1923			1924			1925		
	Cases	Deaths	Cases	Cases	Deaths										
Diphtheria and Membranous Croup	21	3	9	—	—	8	—	—	15	—	—	5	—	—	
Erysipelas	2	—	4	—	—	—	—	—	3	—	—	1	—	—	
Scarlet Fever	87	1	62	1	20	—	—	—	23	—	—	71	1	—	
Enteric Fever	2	—	3	—	—	2	1	—	—	—	—	—	—	—	
Puerperal Fever	2	2	1	—	—	—	—	—	2	—	—	2	—	—	
Malaria	3	—	2	—	—	—	—	—	—	—	—	—	—	—	
Dysentery	1	—	1	—	—	—	—	—	—	—	—	—	—	—	
Cerbo-Spinal Meningitis	—	—	—	—	—	—	—	—	2	—	—	—	—	—	
Acute Primary Pneumonia	1	1	11	7	15	8	11	—	24	—	—	20	9	20	
Acute Influenza Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pulmonary Tuberculosis	20	9	15	13	18	8	20	9	—	—	—	31	6	—	
Other Tubercular Diseases	2	2	8	5	2	3	14	8	—	—	—	18	6	—	
Encephalitis Lethargica	2	—	1	1	—	—	—	—	2	—	—	5	2	—	

## **Smallpox and Vaccination.**

No cases of smallpox have been notified since 1920, and no vaccinations have been performed by the Medical Officer of Health, as there are two Public Vaccinators in the area.

## **Diphtheria and Membranous Croup.**

The annual reports of the two Urban District Councils give no indication as to whether the 21 cases recorded in 1921 occurred sporadically or as an epidemic.

Of the fifteen notified in 1924, an outbreak at the Manchester Children's Convalescent Home was responsible for nine; the first case developed in September, and the remaining eight in the first fortnight in December. Although no definite evidence was forthcoming, the Cook employed at the Home was suspected of being a carrier. All swabs taken from her nose and throat were negative, but as she had previously been sent to the Fever Hospital suffering from a throat condition resembling Diphtheria, it was deemed advisable to dispense with her services later as a precautionary measure. The Home was closed for a period, and thorough disinfection and cleansing carried out before re-opening.

## **Diphtheria Anti-Toxin.**

This is supplied free to Medical Practitioners on request, stocks being kept at the Health Office and Police Stations. Sixty-four thousand units were distributed in 1925, as compared with :—

1921 .....	No figures available.
1922 .....	56,000
1923 .....	23,000
1924 .....	76,000

## **Scarlet Fever.**

This disease will be seen to have been most prevalent in 1921, 1922 and 1925.

With regard to the first two years, very little information is to hand as to the distribution of these cases. The only definite evidence of any epidemic is a note in the Medical Officer's Annual Report for Saint Anne's, in which he records the fact of an outbreak in August and September, 1921, at the Ormerod Children's Home; thirteen cases were attributed to a small boy who developed the disease on August 25th, having only been admitted a few days before. Dr. Tennant states that he had previously called attention to some overcrowding at the Home in question, but apparently his advice as to a reduction in the number of children had not been taken. When the outbreak of Scarlet Fever occurred in 1921, he again visited the Institution and gave specific instructions as to the amount of cubic space to be allotted to each child. He also arranged for the examination by a medical man of each new arrival within 24 hours, a practice which is still in force.

Full particulars of the outbreak in 1925 are available, and the following is a copy of the detailed report furnished to the Ministry of Health under section 14 (4) of the Sanitary Officers' Order, 1922, at its conclusion.

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### SPECIAL REPORT ON AN OUTBREAK OF SCARLET FEVER AT LYTHAM.

The incidence of Scarlet Fever in the District during the first two months of this year was extremely low, only one case being reported. On March 13th, however, I was asked by Local Practitioners to see certain cases (six in all) which were suspected of being Scarlet Fever, and I confirmed the diagnosis in each instance. My initial inquiry elicited the fact that the milk supply in each case was obtained from a farm ("A") situated in the Warton District. An attempt to get into touch with Dr. Court, the Medical Officer of Health to the Fylde Rural District, was unsuccessful, and so in order to avoid delay I visited the farm in question the same afternoon (March 13th) with the Sanitary Inspector (Mr. Haworth). The owner was away from home, but the remainder of the family of ten persons, consisting of the

mother, three grown-up sons, a single daughter and a married daughter with her husband and three children, were examined individually. A male employee who lives in was also examined. No evidence of Scarlet Fever was found, and no history of any previous illness resembling Scarlet Fever could be obtained. The amount of milk sent to Lytham daily approximated to 50 gallons.

During the inquiry the information was given that a supplementary supply of milk—five gallons—was obtained each day from another farm ("B") in the vicinity, to which a visit was immediately paid. Again no evidence of Scarlet Fever, past or present, could be discovered amongst the nine occupants.

A retailer of the milk from farm "A" was also visited on the return journey, but this family was found to be in good health.

Another effort was made to communicate with the Medical Officer of Health of the District (Fylde Rural) in which the suspected farms were situated, and being this time successful, the facts of the case were put to him, and he was asked to visit the farms in question at the earliest opportunity and to keep the occupants under surveillance.

The following additional precautions were at once taken :

(1) All local doctors were notified of the outbreak and requested to inform my office at once of any case about which they had the slightest suspicion.

(2) The County Medical Officer of Health was notified.

(3) The Chief Sanitary Inspector (Mr. H. Yates) visited farm "A" and interviewed the owner. He issued instructions respecting the boiling of all milk cans, and obtained for me a list of all consumers supplied with milk in this District.

(4) The outbuildings were inspected and found to be in a satisfactory condition, and no disease was discovered amongst the cattle, the latter fact being later verified by Mr. J. R. Rigby, M.R.C.V.S., the Borough Veterinary Inspector.

(5) A warning to boil all milk was prepared the same evening, and sent out by the early morning post on the 14th to every local customer of the suspected milk—207 in all, and occupying 194 houses. The wording of the warning was as follows :—

" Dear Sir, or Madam,—I beg to inform you that a slight outbreak of Scarlet Fever has occurred in Lytham, and as this may be caused through infected milk I very strongly recommend that all milk should be boiled before consumption by any member of your household."

(6) The children of St. John's School were examined on the afternoon of the 13th by the School Nurse, who brought several cases to me for inspection; they were instructed to report for daily observation.

(7) The two local boy distributors of milk from farms "A" and "B" were suspended from duty.

On the morning of the 14th (Saturday) seven further cases were reported, and again in every instance the milk supply was from farm "A." During the investigation of these, the fact came to light that there was a case in the home of one of the boys who distributed the milk, and it was immediately thought that he had probably been the cause of the outbreak; he had been suspended the previous evening, but arrangements were made for his bathing and disinfection along with his companion distributor, and both boys were excluded from school as a further precaution.

Dr. Fisher (Chief Assistant to the County Medical Officer), who had arrived in response to my notification, accompanied me to the homes of these two boys, where we examined every member of the household, but without result. Several other possible lines of infection were followed up, but these did not throw any light on the matter.

The question of stopping the milk supply from the farms was considered, but it was decided that this drastic step was unjustifiable in view of the absence of any direct evidence.

A message was received from Dr. Court, stating that he had visited both farms in response to my request and had examined all the family and employees without finding anything suspicious. He agreed to keep both farms, "A" and "B," under observation as they are in his District.

The Managers of the two local Picture Houses were interviewed and told that if the epidemic continued action would be taken under section 221 of the Lytham Saint Anne's Corporation Act forbidding school children to attend at cinemas. Arrangements were also made to disinfect both Picture Houses and St. John's School during the week-end.

On Sunday morning, March 15th, Dr. Fisher and I again visited the families of several suspects, but no further information was obtained.

On Monday, contacts were examined, and St. John's School was again visited and all scholars inspected.

Two further cases were reported, bringing the total up to fifteen.

The owner of the farm was interviewed to see whether it would be possible to sterilize his milk before distribution by heating it in containers to 65% C., by means of his wash-house boiler, a procedure recommended in an article in "The Lancet" of August 18th, 1923. There were many difficulties in the way, and, as the outbreak appeared to be diminishing and we thought that the milk distributing boy (previously mentioned) was the cause of infection, the point was not pressed.

On Tuesday, the 17th, Dr. Fisher telephoned to say that he had records of a case of Scarlet Fever which occurred about the middle of January at Wrea Green, in the Fylde Rural District. At the time of infection, one of the sons of the owner of farm "B" was living in the infected house with his baby, and working at farm "B." He at once returned home, but it was thought that some communication might have been kept up between the houses, and, as a precaution, Dr. Fisher advised that all milk from farm "B" be stopped from entering the District. Instructions were issued to this effect the same day.

A provisional arrangement was entered into with the local Nursing Division to supply voluntary ladies to assist the Nurse in house-to-house visiting should this be required, but their services were not found necessary.

Wednesday, the 18th, was spent in visiting various contacts, and on Friday the Nurse examined all scholars again at St. John's and referred suspects for my inspection.

No further notifications were received until March 21st, when one case was notified and definitely traced to a previous patient.

From this date until the middle of May, 27 cases, at the rate of one or two every few days, were reported, and in many of these direct contact was traced, but we were not satisfied that we had really found the cause, although there was no further mass outbreak and the number of cases did not justify cutting off the suspected milk supply—a serious matter to the farmer concerned, especially as there was still no definite evidence.

It was also noted that a number of these secondary cases were supplied by other milk purveyors who had no connection at all with farm "A."

The children of St. John's School were again examined by the School Nurse and myself, but no cases were found.

I communicated with the Fever Hospital and arranged that every case discharged should report to me for examination before being re-admitted to school.

On Sunday, May 17th, 1925, a startling development occurred. A Local Practitioner rang up and notified me that one of the daughters of the owner of the farm "A" had developed Scarlet Fever. I spoke to Dr. Court, the Medical Officer of the Fylde Rural District, who informed me that he was unable to visit the farm before the next day. I asked him if he would permit me to visit and to take whatever steps I considered necessary; I also requested his permission to my supervision of the family and the farm from then on, and he consented.

I, therefore, visited the farm the same afternoon, accompanied by Dr. Fisher, and arranged with the owner to discontinue his milk supply forthwith, and to turn all his milk into cheese until further notice.

I would like here to place on record the fact that I have from the beginning of the trouble met with nothing but courtesy and help from the farmer in question, and he has done everything in his power to aid our investigations. With many farmers it would have been necessary to bring legal pressure to bear before the milk supply could have been stopped, but in this case no such steps were necessary, and there was, therefore, no delay in carrying out our requests.

The whole household were examined, and another daughter, with some suspicious peeling of both feet and a history of a slight feverish attack three weeks previously, was admitted to Hospital.

The farm was again visited on the 22nd, and another child was sent into Moss Side. I visited and examined the family on May 29th, and, as no further development had occurred, I allowed the farmer to re-commence his milk-round on June 1st, 1925, i.e., ten days after the last case.

I continued my visits on June 3rd, June 10th, and June 16th, and, on the latter occasion, found a married daughter suffering from fairly definite symptoms. This lady had been confined about five weeks previously, and it was arranged for the Hospital to take both mother and child.

The milk supply was again suspended, and after two further negative visits—on June 18th and 23rd—resumed once more. The family were found to be in good health on June 29th.

The total number of cases to date is 43, of which 31 received their milk supply, partly or wholly, from farm "A."

Forty were treated in Hospital, and there was one death.

In addition, eight other cases have occurred since the commencement of the outbreak on March 13th, but these were spread over the central and westerly parts of the Borough, and had no connection whatsoever with the main epidemic.

## **Multiple Cases.**

In two instances three cases and in seven instances two cases occurred in one house.

The total number of individual houses affected was 32.

## **Cases of School Age.**

Twenty-three cases out of the total of 43 were attending school, the remainder comprising 10 adults and 10 infants.

## **Cases by Weeks.**

Week ending Saturday, March 14th.....	13
Week ending Saturday, March 21st .....	3
Week ending Saturday, March 28th .....	6
Week ending Saturday, April 4th .....	3
Week ending Saturday, April 11th .....	3
Week ending Saturday, April 18th .....	2
Week ending Saturday, April 25th .....	2
Week ending Saturday, May 2nd .....	1
Week ending Saturday, May 9th .....	2
Week ending Saturday, May 16th .....	—
Week ending Saturday, May 23rd .....	1
Week ending Saturday, May 30th .....	2
Week ending Saturday, June 6th .....	1
Week ending Saturday, June 13th .....	2
Week ending Saturday, June 20th .....	2
Week ending Saturday, June 27th .....	—

In reviewing the situation, it is difficult to definitely allot the cause in each case, but it seems evident that in the beginning, at any rate, there was a partial infection of the milk supply from farm "A" which would account for the sudden burst of cases between March 13th and March 16th. This may have occurred in one of three ways:—

(1) Contamination by the milk boy in whose home there was a definite case.

(2) Contamination of the milk from farm "B," which was distributed through farm "A" by means of continued communication with the infected household at Wrea Green.

(3) A very mild case on farm "A" which showed so few signs of the disease that it was missed at the Medical Inspections of the family.

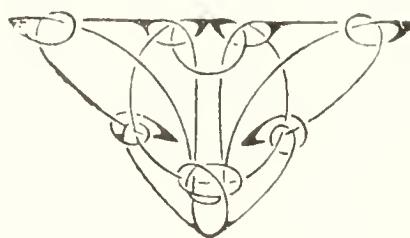
The third suggestion seems the most probable since definite cases later occurred on the farm, and it is believed that the precautions which were at once taken prevented a number of further cases, especially as the majority of people boiled their milk in response to our warning notice.

Almost all the cases were situated at the eastern end of the Borough, an area which is densely populated, and where there is very close communication between the various inhabitants.

The disease has throughout been of a mild character, and though, in one way, this is a blessing, in another it is a distinct disadvantage. Many cases were so slight that the presence of infection was not even suspected by the parents; no medical advice was taken, and the child continued to consort with its fellows at school and play. In consequence, the disease continued for a longer period than would otherwise have been the case, and only terminated on June 17th.

JOHN P. LITT, M.D.

July 10th, 1925.



## **Pneumonia, Malaria, Dysentery, and Trench Fever.**

The comparative figures of cases and deaths from pneumonia shew plainly that Practitioners are not notifying these cases, and, in consequence, circular letters have been addressed to all doctors asking for their co-operation in this matter.

There have been no cases of malaria, dysentery, or Trench Fever in 1925, and only very few in the foregoing years (vide table).

**Tuberculosis** is dealt with later in the report.

### **Encephalitis Lethargica.**

There has been no marked outbreak of this disease, only five sporadic cases having been notified.

### **Schick and Dick Tests.**

No use has yet been made of these tests in the District.

### **Influenza.**

Has not been prevalent, the number of deaths attributed to this cause being only eight.

### **Non-Notifiable Diseases.**

It is almost impossible to give comprehensive figures for diseases of an infectious character such as measles, whooping cough, chicken-pox and mumps, which are not notifiable. The total number of cases reported from various sources amongst the Elementary School children during 1925 was :—

Measles .....	308
Chicken-pox .....	88
Whooping Cough .....	50
Mumps .....	2

The number of measles cases was largely caused by an outbreak of some severity at the Lytham end of the Borough during September, October, and November, the actual number of children excluded during this period being 289.

No schools or departments were closed, the policy of careful exclusion of individual children being adopted.

Only one death was ascribed to this cause, and that in an infant aged 13 months.

The system by which Head Teachers notify the School Medical Officer of any absentees whom they suspect of having an infectious condition is extensively used, and is exceedingly useful. Cases can be promptly visited by the School Nurse and advice given regarding the care of the affected children where the Teachers' suspicions are found to be justified. Contacts can be also immediately excluded for the requisite period; in the case of measles, seniors who have previously had the disease are allowed to remain at school.

#### Notifiable Diseases (other than Tuberculosis) during the Year 1925.

DISEASE	Total Cases Notified	Cases admitted to Hospital	Total Deaths
Smallpox .....	—	—	—
Scarlet Fever .....	71	60	1
Diphtheria .....	5	3	—
Enteric Fever (including Paratyphoid) .....	—	—	—
Puerperal Fever .....	2	—	—
Pneumonia .....	9	—	20
Other Diseases generally Notifiable :			
Erysipelas .....	1	—	—
Malaria .....	—	—	—
Ophthalmia Neonatorum...	1	—	—
Dysentery .....	—	—	—
Cerebro-spinal Meningitis .	—	—	—
Encephalitis Lethargica ...	5	—	3
Other Diseases Notifiable Locally .....	—	—	—

A Summary of Infectious Diseases, with an analysis of the total cases and deaths by ages, will be found in Table 1 at the end of the Report.

### Disinfection.

During the year, 471 rooms have been disinfected on account of Infectious Disease, the method employed being the Formalin Lamp and Formalin Spray. This procedure is also adopted in cases of Phthisis and for non-notifiable disease on request. All Elementary Schools have been supplied with sprays by the Education Authority, the solution for these being issued free by the Health Department. In cases of epidemic disease, additional and more thorough disinfection of the school premises is carried out by the Sanitary Staff.

Clothing, bedding, &c., is disinfected by steam, there being two steam disinfectors in the area situated at the Destructor Works. Two thousand two hundred and forty-three articles were dealt with in 1925.

There are no definite arrangements in force for the bathing of verminous persons, but two such persons were sent for cleansing to the Union Hospital at Kirkham during the year.



## Tuberculosis.

New cases and Mortality during 1925 :—

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
Years	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	...	...	1	1	...	...	1	...
1 to 5	...	...	3	1	...	...	1	...
5 to 10	...	...	...	1	...	...	1	...
10 to 15	1	...	1	2	...	...	1	...
15 to 20	1	...	...	3	...	...	...	...
20 to 25	1	2	...	...	...	...	...	...
25 to 35	4	5	1	1	...	...	...	...
35 to 45	7	1	1	...	3	...	...	...
45 to 55	4	...	...	...	1	1	...	...
55 to 65	2	2	1	1	1	...	1	1
65 and upwards	1	...	...	...	...	...	...	...
Totals	...	21	10	8	10	5	1	5
		31		18		6		6

It has been unnecessary to take action under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under the Public Health Act, 1925, section 62.

The rates of non-notified tuberculosis deaths to the total tuberculosis deaths was 8.33.

The notification of tuberculosis has been more efficient than in previous years, but there is little doubt that some cases are missed; the reason in all investigated cases has invariably been found to be forgetfulness, and not refusal or wilful neglect on the part of the Practitioner concerned.

The number of cases and deaths during the period covered by the report are as follows :—

	1921		1922		1923		1924		1925	
	Cases	Deaths								
Pulmonary Tuberculosis	20	9	15	13	18	8	20	9	31	6
Other forms of Tuberculosis	2	2	8	5	2	3	14	8	18	6

I attribute the greater number of cases in the later years very largely to more efficient notification, and especially is this the case with the non-pulmonary types of the disease. No excessive incidence of or mortality from tuberculosis has been noted in any particular occupation.

The arrangements with regard to tuberculosis in all its forms are undertaken by the County Authorities, and all notified cases are regularly visited by Specialist Officers, who provide Sanatorium treatment, where this is deemed necessary.

### Venereal Disease.

The diagnosis and treatment of these diseases are both dealt with under the County scheme, and there is a well-equipped Clinic at the Victoria Hospital, Blackpool, at which our cases may attend.

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## MATERNITY AND CHILD WELFARE.

(1) The County is the Local Supervising Authority under the Midwives' Acts, 1902 and 1918, and the inspection of midwives is undertaken by members of its staff.

### (2) General Arrangements.

Previous to 1923 an Infant Welfare Centre was in being at Lytham at the Mission Hall in Albert Street, and later at the Congregational School, Bannister Street, under the supervision of an Assistant County Medical Officer. Sessions were held every Thursday afternoon. On amalgamation the Centre was taken over by the Borough from the County Authority on July 5th, 1923, and was installed in the rear premises of the Old Council Offices. During 1924 it was moved to more commodious accommodation at the front of

the building, and on May 27th of the same year a second Centre was opened at the Wesleyan Schools, Church Road, St. Anne's. The new Centre met the growing needs of the work, and obviated the necessity for a long and expensive bus ride for those mothers and infants resident at the western end of the Borough. On August 25th, 1925, the Saint Anne's Centre removed to its permanent quarters at the new School Clinic, Public Offices, South Drive, which were admirably adapted for this purpose.

There are now, therefore, efficient Centres at either end of the District, and sessions are held from 2-30 to 4-30 p.m. twice weekly—Saint Anne's on Tuesday and Lytham on Thursday afternoon.

The new Bath Scheme at Lytham will necessitate temporary removal from the present premises during the alterations, but provision has been made in the new venture for adequate accommodation.

Expectant and nursing mothers, and infants and children under five years of age, are welcome at the Centres. The Medical Officer of Health acts as Medical Superintendent, and is in attendance with a Health Visitor at each session. Consultations are given to those who wish it, and treatment of minor defects is carried out at the School Clinic under arrangements sanctioned by the Ministry of Health. There is a Voluntary Ladies' Committee, the members of which are present during the sessions and assist with the weighing of the babies and keeping of records; they also provide tea at a nominal sum and give demonstrations in dressmaking to the mothers. Their work is very much appreciated, and much of the popularity of the Centres is due to their kindly help.

There is a system of Home Visiting of new-born babies by the Health Visitors, and re-visits are made from time to time, the young mothers being encouraged to attend at the nearest Centre. It is satisfactory to note that local midwives frequently advise their patients to come to us for advice and treatment, and everything possible is done to carry on this necessary co-operation.

## **Maternity Beds.**

There is no doubt that in this, as in other areas, there are many of the poorer homes where the lying-in woman does not have a fair chance. There are families living in lodgings, and in a number of houses lack of suitable accommodation, overcrowding, and primitive methods of domestic hygiene militate against that care which is so essential at this critical period.

The question of the provision of maternity beds has been receiving the very serious consideration of the Council for some time, as previous to 1924 the only accommodation available was in expensive Nursing Homes, or at the Kirkham Union Infirmary. The former were beyond the means of the class referred to above, and a strong prejudice exists against being confined in a Workhouse; in consequence the confinements had to be conducted at home, often under very difficult circumstances, with ill effects to both mother and child. An arrangement with Preston Infirmary to take complicated cases had proved impracticable on account of distance. Late in 1924 the Lytham Cottage Hospital, realising the urgent necessity for some provision for maternity cases, set aside three beds for this purpose, and the provision has been justified. Three cases were admitted in 1924, and sixteen in 1925, including one case from Saint Anne's. An attempt was made in September, 1924, to come to an arrangement with the Matron of one of the Saint Anne's Nursing Homes to accept cases recommended by the Medical Officer of Health at a reduced fee, but unfortunately our efforts were unsuccessful.

The Medical Officer interviewed the Ministry regarding this subject on May 30th, 1925, and they agreed to favourably consider a scheme for the subsidy of beds at local Hospitals. The Trustees of the two local Hospitals were approached, but neither desired to participate in a Borough Maternity Scheme, both being averse to any supervision or control.

In August, 1925, the Town Clerk conferred with the Ministry of Health with a view to obtaining their sanction

to the equipment of a Borough Home, as all our other plans appeared to have been fruitless.

A reply was received on the 11th instant stating that although the Minister was in sympathy with the Council's desire to make such provision, he was of the opinion that a Home designed to meet the needs of the Borough alone would be too small to be either satisfactory or economical. He could, therefore, not sanction the request, and suggested that the local Hospitals be again approached.

Towards the end of the year the Trustees of the Saint Anne's Memorial Hospital, on further consideration, decided to build a Maternity Ward of six beds, and this should be complete towards the latter end of 1926. The project will be entirely under the control of the Trustees, but it is believed that a scheme can be formulated whereby cases may be referred from the Maternity Centres. Such provision should satisfy the needs of the Borough for some years to come, and it is hoped that it will meet with great success.

The Lytham Hospital Committee have, in the meantime, also erected a Maternity block, but this, at present, is not available for patients as it is used for the housing of the Nursing Staff.

There is no Children's Hospital in the Borough, but young patients are admitted to the wards at both general Hospitals.

### **Maternity and Infantile Mortality.**

The number of women dying in consequence of child-birth is comparatively small in this area, and is shewn below :

	1921	1922	1923	1924	1925
From Sepsis .....	2	...	—	...	—
From other causes	—	...	1	...	2

It is gratifying to note that no deaths have been attributed to sepsis since 1921.

The deaths of children under one year of age may be similarly depicted :—

	1921	1922	1923	1924	1925
Legitimate .....	15 ...	10 ...	11 ...	16 ...	13
Illegitimate .....	3 ...	1 ...	—	—	4

A review of the Infantile Mortality rate since 1895 is of interest :—

Mean of 5 years	Rate under 1 year per 1,000 births
1895-1899 .....	143
1900-1904 .....	114
1905-1909 .....	82
1909-1914 .....	81
1915-1919 .....	55
1920-1924 .....	52

In 1924 it was 63, and in 1925, 67; a slight increase.

The figure for England and Wales during 1925 was 75 per 1,000 births.

### Infantile Diarrhoea.

The extinction of this disease is almost complete. At one time it was an extremely common condition, resulting in many deaths; to-day it is a rarity. Many views are held as to the cause of its abolition, amongst which improved methods of hygiene and the advent of Infant Welfare are strongly favoured. A novel theory was advanced in a medical journal during 1925, and the writer brings forward a very good case. He attributes the disappearance of this malady to the replacement of horse by motor transport. Infantile diarrhoea is pointed out as being an acute infective process due to organisms; it is spread by food which has been infected by flies bred in fresh animal excrement, and the very natural inference is made that as the excremental breeding places became fewer the chances of contamination of food became proportionately less.

Whatever the cause of its elimination, let us trust that this truly terrible scourge may never return.

## **Ante-Natal Work.**

The examination of expectant mothers is carried out at the Centres, and where any gross defect is found the patient is at once referred to her private practitioner.

Number of children on the books of the Lytham Saint Anne's Centres :—

	1923	1924	1925
Under one year of age .....	37	... 108	... 102
From 1 to 2 years of age .....	24	... 49	... 86
Over 2 years of age .....	15	... 47	... 67
	—	—	—
Total .....	76	... 204	... 255
	—	—	—

Attendances by the above children :—

Under one year of age .....	328	... 881	... 1015
From 1 to 2 years of age .....	167	... 465	... 423
Over 2 years of age .....	118	... 344	... 423
	—	—	—
Total .....	613	... 1690	... 1861
	—	—	—

Attendances by mothers .....

Individual children seen by

Medical Superintendent .....

In addition to the above, expectant mothers made 70 visits to the Centres.

There were 34 expectant mothers registered during the year.

Records for 1923 only embrace the period from July 5th, when the Centre was taken over from the County Authorities.

Visits by Health Visitors :—

To expectant mothers : (1) First visits, 45 ; (2) Total visits, 162.

To infants under 1 : (1) First visits, 149 ; (2) Total visits, 1,101.

To children 1—5 : Total visits, 1,133.

## **Supply of Food and Milk.**

Fresh milk is supplied to necessitous nursing mothers and infants by arrangement with local dairies. Dried milks and other foods, such as Virol, Ovaltine, &c., are sold at cost price to those whose incomes are under the scale approved by the Ministry of Health.

### **Infant Foods.**

Supply of Glaxo to suitable cases :—

Supplied free .....	1 packet
At nett actual cost.....	671 packets
	672

Other foods	At actual cost packets
Almata .....	152
Ambrosia .....	2
Angiers (large) .....	20
Angiers (small) .....	12
Cod and Malt .....	139
Glaxo Malted .....	4
Horlicks .....	31
Ovaltine .....	88
Trufood (Humanised) .....	17
Trufood Milk Powder .....	28
Virol .....	205
Virolax (large) .....	15
Virolax (small) .....	48

The nett cost of fresh milk supplied to necessitous cases was £32 11s. 9d. Twelve packets of food were supplied at less than cost price.

### **Orthopædic Treatment.**

There is no special provision for Orthopædic treatment, but if we participate in the recently-organised County scheme

arrangements will be made for children under five years, as well as for those of school age.

Urgent cases are at present referred for Specialist advice to Manchester, Liverpool, and Preston, by private agreement with the Specialist concerned, but this is far from satisfactory, as owing to the difficulty and expense of transport the most important part of this work—the “after-care”—is apt to be neglected, and, in consequence, little benefit results, and cases frequently relapse.

### **Voluntary Societies.**

No Voluntary Society is included in the Authority's Welfare scheme, but as previously noted a Ladies' Voluntary Committee is attached to each Centre.

### **Co-Ordination with School Medical Service.**

Close co-ordination exists; the Medical Officer of Health also performs the duties of School Medical Officer, and the Health Visitors are School Nurses. Cases can be, and frequently are, referred from the Centres to the School Clinics for advice and treatment under arrangements sanctioned by the Minister of Health and the Board of Education.

### **Puerperal Fever, Ophthalmia Neonatorum, etc.**

The incidence of puerperal fever is low in this District : 1921, 2 cases ; 1922, 1 case ; 1923, none ; 1924, 2 cases ; 1925, 2 cases ; and the only deaths are two recorded in 1921.

The Midwife implicated is in all cases visited by the County Inspector of Midwives, and the necessary disinfection of the Nurse's clothing, bag, &c., is carried out by the Health Department.

## Ophthalmia Neonatorum.

Is luckily also rare, only one case being noted in 1925.

### OPHTHALMIA NEONATORUM.

Notified	CASES		Unimpair'd	Vision Impaired	Total Blindness	Deaths				
	Treated									
	At Home	In Hospital								
1	1	-	1	-	-	-				

Cases of eye-discharge in infants are visited and treated by the Health Visitors at the request of the Medical Practitioner in charge of the case.

Cases of measles, whooping cough, &c., are also visited when they become known, and advice is given with a view to the saving of life and the prevention of complications.

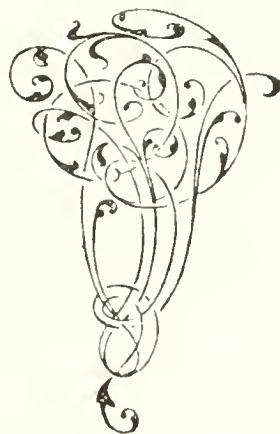


TABLE I.—INFECTIOUS DISEASES.

Number of cases of infectious disease notified, number of deaths from these diseases, number of cases removed to hospital, and deaths in hospital during the year 1925.

DISEASE.	CASES NOTIFIED										HOSPITAL				DEATHS IN HOSPITAL					
	YEARS										Total Cases removed to Hospital	Total Deaths over 65 and under 65	Total Deaths 65 and over	Total Deaths in Hospital	Deaths of persons belonging to district	Hospital				
	Total Cases at all Ages	Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over	To Hospital	Hospital					
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Diphtheria & Membranous Croup	5	...	...	...	...	...	1	1	3	...	...	...	...	...	3	...				
Erysipelas	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...				
Scarlet Fever	71	1	3	1	4	3	26	15	8	9	1	...	...	1	60	1				
Enteric Fever (including Paratyphoid)	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...				
Puerperal Fever	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...				
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Cerebro-spinal Meningitis	...	...	...	...	...	...	...	...	...	...	1	2	1	...	3	...				
Encephalitis Lethargica	5	...	...	...	...	...	...	...	...	...	1	1	1	...	1	...				
Acute Primary Pneumonia	1	9	...	...	...	...	...	...	...	...	1	2	2	4	20	...				
Acute Influenza	1	31	...	...	...	...	...	...	...	...	1	1	12	8	8	1	...			
Pulmonary Tuberculosis	...	18	2	1	1	2	...	1	3	3	2	1	2	...	16	...				
Other forms of Tuberculosis	...	1	1	...	...	...	...	...	...	...	...	...	...	...	6	...				
Ophthalmia Neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...				
Chicken-pox (Limited period)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...				
Totals	...	...	...	...	...	...	4	4	2	6	4	28	22	13	27	14	5	37	80	1

TABLE II.—Causes of Death in Lytham St. Anne's.

ALL CAUSES.	Males. Females.	
All Causes .....	126	171
Enteric Fever .....	—	—
Smallpox .....	—	—
Measles .....	—	1
Scarlet Fever .....	1	—
Whooping Cough .....	—	—
Diphtheria .....	—	—
Influenza .....	3	5
Encephalitis lethargica .....	2	1
Meningococcal meningitis .....	—	—
Tuberculosis of respiratory system .....	5	1
Other Tuberculous Diseases .....	5	1
Cancer, Malignant Disease .....	10	27
Rheumatic Fever .....	—	—
Diabetes .....	3	2
Cerebral Hemorrhage, &c. ....	6	9
Heart Disease .....	26	27
Arterio-sclerosis .....	8	14
Bronchitis .....	2	7
Pneumonia (all forms) .....	7	13
Other Respiratory Diseases .....	—	4
Ulcer of Stomach or Duodenum .....	4	—
Diarrhoea, &c. (under two years).....	—	1
Appendicitis and Typhlitis .....	—	1
Cirrhosis of Liver .....	3	—
Acute and Chronic Nephritis .....	6	9
Puerperal Sepsis .....	—	—
Other Accidents and Diseases of Pregnancy and Parturition .....	—	3
Congenital Debility and Malformation, Premature Birth .....	6	2
Suicide .....	2	—
Other Deaths from Violence .....	1	4
Other Defined Diseases .....	23	37
Causes ill-defined or unknown .....	3	2
Special Causes (included above)—		
Poliomyelitis .....	—	—
Polioencephalitis .....	—	—
Deaths of Infants under one year:—		
Total .....	12	5
Illegitimate .....	2	2
Total Births .....	134	118
Legitimate .....	128	110
Illegitimate .....	6	8
Population .....	21,780	

TABLE III.—BIRTH-RATE, DEATH-RATE, and ANALYSIS OF MORTALITY during the Year 1925

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

BIRTH-RATE PER 1,000 TOTAL POPULA-TION, Causes.	ANNUAL DEATH-RATE PER 1,000 POPULATION,						RATE PER 1,000 BIRTHS PERCENTAGE OF TOTAL DEATHS.								
	All	Intercat- e- Causes.	Small-pox.	Malaria.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Tuberculosis.	Violence.	Total Deaths under Two years.	Deaths and Infants under one year.	Deaths bed by Medical Practitioners.	Deaths of Civilians in London and the Groups of Towns.		
England and Wales	15.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	7.5	6.9	1.0	
105 County Boroughs and Great Towns, including London.	15.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	7.9	9.21	7.3	0.6
157 Smaller Towns (1921 Adjusted Populations 20,000-50,000), London	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	7.1	9.30	5.9	1.1
London	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	6.7	9.11	5.9	0.0

TABLE IV.

1925. ST. ANNES ON THE SEA.

**Meteorological Observations.**

Month	Atmospheric Pressure.		Temperature.		Earth Grass Thermometers.		Rainfall.		Sun-shine.		Direction of Wind at 9 a.m.		At 9 a.m. No. of Days of	
	Mean.	Maximum.	Mean.	Maximum.	Mean.	Maximum.	Mean.	Maximum.	Mean.	Maximum.	Mean.	Maximum.	Mean.	Maximum.
Jan.	30.109	30.716	28.662	42.2	48.1	32.5	37.9	4.3	85	41.5	44.6	33.6	2.05	13
Feb.	29.566	30.446	28.534	41.1	48.7	26.8	35.9	5.2	88	41.2	43.7	32.9	3.58	21
Mar.	30.235	30.634	29.562	42.9	51.5	27.4	38.1	4.8	85	42.1	43.5	32.8	1.16	11
Apr.	29.843	30.350	29.418	42.7	52.8	33.0	37.3	5.4	77	48.0	46.7	35.3	1.82	11
May.	29.766	30.286	29.148	52.0	57.4	35.8	47.0	5.0	81	53.9	51.0	44.2	3.75	21
June.	30.185	30.472	29.873	59.2	73.9	46.8	53.6	5.6	74	62.7	57.7	43.9	0.13	2
July	30.029	30.372	29.460	60.9	66.5	50.0	56.1	4.8	77	64.6	61.4	52.7	2.52	10
Aug.	29.973	30.442	29.523	61.0	66.1	50.5	55.8	5.2	82	63.2	61.2	52.9	3.30	16
Sept.	29.972	30.378	29.350	53.6	59.7	41.9	48.5	5.1	82	56.3	57.3	40.9	3.78	20
Oct.	29.932	30.628	28.628	51.4	57.7	36.2	46.2	5.2	87	52.7	54.2	42.3	5.11	18
Nov.	29.994	30.624	29.128	58.1	52.2	25.0	34.0	4.1	82	41.8	47.9	30.2	2.37	12
Dec.	29.748	30.562	28.788	38.3	49.4	24.0	34.0	4.3	84	37.1	41.6	31.1	2.37	11
Sums	359.352	365.950	350.074	583.4684	9.524	429.9	524.4	59.0	984	605.1	610.8	472.8	31.94	166
Means	29.946	30.496	29.173	48.6	57.0	35.8	43.7	4.9	82	50.4	50.9	39.4		7

## VETERINARY INSPECTOR'S ANNUAL REPORT.

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(To the Mayor and Members of the Corporation of Lytham  
Saint Anne's).

Miss ROSSALL AND GENTLEMEN,

I have the honour to present to you a Report on my work as Veterinary Inspector during 1925, in connection with the inspection of cattle and cowsheds in your district.

Quarterly examinations have been made of all cattle on farms within your boundaries, the average number examined at each inspection being 563; and, in addition to these regular examinations, special visits have been made to various farms when the condition of any animal rendered it desirable that further attention should be given.

At each inspection it has been necessary to temporarily stop the use of milk of certain animals; sometimes because of sickness, but usually on account of some affection of the udder, either of an inflammatory nature or due to injury.

Three samples of milk were taken from cattle suspected of tuberculosis of the udder, and two of them were found to contain tubercle bacilli. One of these, occurring before the introduction of the Tuberculosis Order, was disposed of at once by the owner. The other was reported to the Police, and was slaughtered according to the provisions of the Order administered by the Lancashire County Council. Four other cattle suffering from tuberculosis of the lungs or tubercular emaciation, were reported to the same Authority and similarly disposed of.

The general health of the stocks was good, very few cases of acute illness being experienced during the year.

The hygiene of the cowsheds received due attention, the interiors of the buildings being limewashed twice during the year, and, when necessary, instructions were given regarding the grooming of any cattle.

Two important legislative measures dealing with the milk supply came into force on September 1st—the Tuberculosis Order and the long-postponed Milk and Dairies (Consolidation) Act, 1915. Both these Acts prohibit the use for the production of milk of any cow giving tuberculous milk, or is suffering from tuberculosis of the udder or tubercular emaciation. Such animals are dealt with under the Tuberculosis Order. The owner of a suspected animal is required to report to the Police, and animals found affected after full veterinary enquiry are slaughtered, and compensation made according to the degree of advancement of the disease. This Order puts an end to the pernicious practice of disposal of an animal known to be tubercular.

The Milk and Dairies Act gives increased powers to Local Authorities for the regulation of the milk supply, and makes provisions in respect of the handling and sale of milk, the purpose of such provisions being to ensure that in the interests of public health only milk of approved purity shall be offered for sale.

I have the honour to be, Miss Rossall and Gentlemen,

Your obedient Servant,

J. R. RIGBY, M.R.C.V.S.

**ANNUAL REPORT OF THE CHIEF SANITARY  
INSPECTOR,**

HAROLD YATES, C.R.S.I., M.I.C.S.,

ON

**HOUSE REFUSE REMOVAL AND DISPOSAL.**

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(To the Mayor and Members of the Corporation of Lytham  
Saint Anne's).

Miss ROSSALL AND GENTLEMEN,

I have pleasure in submitting to you my Annual Report on the collection and disposal of house refuse during the year 1925. The tables indicate the character, amount, and cost of the work done in connection with the above. It will be observed that Table "B" is somewhat different from that of previous years. This Table is the one suggested by the Committee appointed by the Ministry of Health to consider the Cleansing Services in the Country which allows for uniformity of costing in all districts. The whole of the tables where figures deal with per 1,000 inhabitants are based on the Registrar General's estimated population, viz., 21,780. Thus, we get a high daily yield of refuse per 1,000 inhabitants. There are 5,802 houses in the Borough, and if we calculated on the basis of four persons per house we should have a population of 23,208, which would lessen considerably the amount of refuse made per 1,000 inhabitants.

TABLE A.  
(House and Trade Refuse, but excluding Fish Offal).

Month 1925.	No. of Dustbins Emptied.	No. of Loads Removed.	Weight.		
			T.	C.	Q.
January .....	25583	351	645	6	2
February .....	22904	331	590	13	0
March .....	25326	376	643	2	3
April .....	25467	380	660	11	0
May .....	25619	355	596	8	2
June .....	25884	361	551	1	2
July .....	27323	365	552	10	0
August .....	27368	354	549	1	3
September .....	28629	366	573	10	3
October .....	28911	364	612	14	3
November .....	27244	348	618	9	3
December .....	29614	386	699	9	1
Totals .....	319872	4337	7292	19	2

TABLE B.—House and Trade Refuse.

Table shewing costs for Year 1925.

	COLLECTION.				DISPOSAL.				TOTAL.			
	Including Depreciation or Loan Charges.				Excluding Depreciation or Loan Charges.				Including Depreciation or Loan Charges.			
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
REVENUE ACCOUNT.												
Gross Expenditure .....	3584	17	5	3298	17	5	3431	10	0	2984	10	0
Gross Income.....	101	0	0	101	0	0	256	0	0	256	0	0
Nett Cost .....	3483	17	5	3197	17	5	2175	10	0	1828	10	0
UNIT COSTS.												
Gross Expenditure per ton	9	7	6	8	10	3	6	8	0	5	8	5
Gross Income .. per ton	0	3	2	0	3	2	0	8	4	0	8	4
Net Cost .....	9	4	4	8	7	1	5	11	6	5	0	1
Net Cost per 1000 population.	159	19	1	146	16	6	99	17	8	83	19	0
Net cost per 1000 houses or premises from which refuse is collected .....	690	9	2	551	3	4	374	19	1	315	3	0
RATE POUNDAGE.												
Net cost, equivalent rate in the £ .....	.....	3	13	2.88	2.88	2.88	1.96	1.96	1.96	1.65	1.65	1.65
Percentage of above to rates in the £ .....	2.7%			2.5%			1.7%			1.4%		

Total refuse collected, 7,440 tons.

Total refuse disposed of at Works, 7,293 tons.

Population, midsummer, 1925, 21,780.

Weight collected per 1,000 of the population per working day, 22 cwt.s.

Weight per 1,000 of the population per day, 16 cwt.s.

Number of houses and premises, 5,802.

Rateable Value, £259,778.

Product of a Penny Rate, £1,110.

Total rates in the £, 9 6.

4.73  
3.9%

TABLE C. (Excluding Fish Official).

Motor Lorry	Date Purchased	Cost	Estimated present value Dec. 1925	Depreciation Licences, Insurance Petrol, Oil, Repairs, &c.	Wages			Motor Drivers	Manual Labour	£ s. d.	£ s. d.	£ s. d.	T C Q.	Weight of Refuse Collected		
					£	s.	d.									
No. 2 VULCAN	Oct. 22, 1921	875	385	352	4	7		180	13	0	958	10	6	3226	0	0
No. 3 VULCAN	Feb. 28, 1924	£540 10s.	396	325	11	10		192	10	3				2674	3	0
FORD (Tonner)	Feb. 4, 1924	134	51	173	19	3		118	13	1	-1164	3	2	1387	16	2
Totals ...	...	...	£1549 10s.	£832	851	15	8	491	16	4	2122	13	8	7292	19	2

Average length of haul:  $1\frac{3}{4}$  miles.

TABLE D.  
Fish and Abattoir Offal.

WAGES		Proportion of running costs of motor	Approximate weight, etc., collected	Gross cost per ton for collection	Gross cost per ton for haulage
Motor Drivers	Manual Labour				
18 8 10	41 16 4	28 6 7	147 0 0	16 1½	10 5½
/— s. d.	/— s. d.	/— s. d.	T C Q.	s. d.	s. d.

The number of receptacles cleansed by this Department are as follows :—

6,131 Ashbins, &c.

61 Pail Closets.

All the ashbins are emptied at least once per week, and where necessary, twice per week, whilst in the case of hotels and other premises they are emptied almost daily.

There are three motor drivers and 16 men engaged on house refuse removal; two foremen and seven chargemen at the Refuse Disposal Works, and also one man employed on the Scrap Baling Plant and Mortar Mill, and, as occasion demands, as chargeman.

### Haulage.

Two 2-ton Vulcan Motors and one Ford Tonner are utilised in the removal of house refuse; the latter being also employed to remove fish and abattoir offal, infected bedding, etc., and all three are used for any other haulage required by the Department. One Vulcan Motor is engaged in cleansing the Lytham Section of the Borough, and the remaining two the St. Anne's Section.

### Weight.

The total weight of house refuse removed in 1925 was 7,292 tons 19 cwts. 2 qrs., giving a daily yield of 16 cwts. per 1,000 inhabitants.

The average weight per house per annum was 1 ton 5 cwts., against 1 ton 8 cwts. 3 qrs. in 1924, and although we have 331 more loads the refuse has been lighter in character, which proves that a large amount could be disposed of on the ordinary domestic fire. There is yet plenty of room for improvement, and I would again appeal to householders to burn as much paper and vegetable refuse as possible. Place tea leaves, potato peelings and waste vegetables in an old newspaper, screw it up tightly, and put on the fire, thus saving your rates and your coal.

### Loads.

The number of motor loads of house refuse removed was 4,337; each load is weighed and the weight recorded.

### Cost.

The total net cost of manual labour and haulage (including Depreciation, Licences, Insurance, &c., for house and trade refuse) amounted to £3,483 17s. 5d., the average cost per ton for haulage only being 3s. 10d., and for collection 9s. 4d.

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## REFUSE DISPOSAL WORKS.

During the year 3,324 tons 5 cwts. 3 qrs. of refuse have been dealt with at the Lytham Disposal Works, and 3,968 tons 13 cwts. 3 qrs. at the St. Anne's Works.

At Lytham, the steam generated is used for the pumping machinery in connection with the Sewage Works, lighting the Works, and for the Disinfecter.

At St. Anne's, the steam is utilised for driving a Mortar Mill and Baling Press, and for lighting the Works.

The following table shows the gross cost of disposal (including Tin Baling) :—

	Wages			Depreciation, Repairs and Maintenance			Weight of Refuse Disposed of		
Lytham .....	£	s.	d.	£	s.	d.	T.	c.	q.
	630	3	11	126	9	8	3324	5	3
St. Annes .....	971	12	9	703	3	8	3968	13	3
Totals .....	1601	16	8	829	13	4	7292	19	2

### MORTAR MILL.—Expenditure.

	Wages			Lime, Repairs Depreciation and Maintenance			Total Cost		
	£	s.	d.	£	s.	d.	£	s.	d.
	57	5	11	56	5	10	113	11	9

### MORTAR MILL.—Receipts.

	Weight					
	T.	c.	q.	£	s.	d.
Corporation Departments .....	52	5	0	39	17	6
Contractors .....	147	1	3	121	1	6
Cash Sales.....	109	7	0	90	12	6
Totals .....	308	16	3	251	11	6

### BALING PRESS.

Wages	Repairs and Maintenance, Depreciation etc.	Total			Weight of Scrap Baled	Receipts		
		£	s.	d.				
£	s.	d.	£	s.	d.	£	s.	d.
57	16	7	34	12	9	92	9	4
						92	4	2
						28	0	0

NOTE.—These costs include transport of loose tins from Lytham Disposal Works to St. Anne's Works; transport of baled scrap from Works to Railway, and also loading Wagons. At the end of the year approximately 80 tons of the total scrap baled were on hand, but this stock has since been sold.

### Clinkers.

1,506 tons 16 cwts. of clinkers have been supplied to other Departments of the Corporation, for which the sum of £115 10s. 5d. has been received.

1,013 tons have been sold to local contractors, £77 10s. 8d. being paid for same, and 284 tons 12 cwt. have been disposed of at the Works, realising the sum of £22 15s. 4d.

Other receipts are £8 2s. 2d. for loose scrap, and £3 10s. 6d. for burning refuse.

The total receipts are as follows :—

		£	s.	d.
MORTAR.	Corporation Departments .....	39	17	6
	Contractors .....	121	1	6
	Cash Sales .....	90	12	6
CLINKERS.	Corporation Departments .....	115	10	5
	Contractors .....	77	10	8
	Cash Sales .....	22	15	4
BALED SCRAP	.....	28	0	0
LOOSE SCRAP	.....	8	2	2
BURNING REFUSE	.....	3	10	6
		<hr/>		
		£	507	0
		<hr/>		7

The work of the Cleansing Department continues to increase very considerably, and entails much thought, care, and active supervision, owing to the large number of houses which have been built. One of the greatest difficulties the Department has still to contend with is the number of un-made streets, which entails long carries and consequently adds to the cost of collection.

## FERTILISER PLANT.

In the early part of the year a plant was installed by The Industrial Waste Eliminators, Ltd., London, at the St. Anne's Abattoirs, for the purpose of converting fish offal and slaughterhouse waste into a valuable fertiliser.

This plant commenced working on May 14th, 1925, and during the remaining months of the year many tons of fertiliser were made. As the sale of manure is a seasonable one, and is only purchased by farmers in the early Spring, only a small quantity was sold to local horticulturists during the year. It will be better to give exact costings after a complete year's working, which I hope to do in next year's Annual Report.

In conclusion, I beg to acknowledge the help and assistance given to me by the Chairman, Vice-Chairman, and Members of the Health Sub-Committee in carrying out my duties during the year.

I beg to remain, Miss Rossall and Gentlemen,

Your obedient Servant,

H. YATES,

Chief Sanitary Inspector.





